Environmental Services Department
Water & Waste Management
On-Site Wastewater Program

CHAMBER TECHNOLOGY

Design Guide
For an
ON-SITE WASTEWATER TREATMENT FACILITY (OSWTF)

A basic guide to designing a Conventional OSWTF to serve a single family residence in Maricopa County. This guide includes instruction on how to design an OSWTF and submit a complete application called the Notice of Intent to Discharge (NOID) Packet.*

* A standard septic tank and disposal field design specified in this guide is intended to serve most sites where no limiting conditions are identified by the site investigation conducted under the Aquifer Protection Permit Rule - R18-9-A311. Typical disposal fields are: Shallow Trenches, Deep Trenches, Leach Beds, Seepage Pits or Chamber Technologies.

**Design requirements are subject to revision

Water & Waste Management Division, 1001 North Central Ave, Suite 150, Phoenix, Arizona 85004(602) 506 6666
February 15, 2005

ENVIRONMENTAL SERVICES
DEPARTMENT

Albert F. Brown, RS, MPA, Director
1001 North Central, Ste. 150
Phoenix, AZ 85004

DIVISION OF WATER AND
WASTE MANAGEMENT

John A. Power, P.E., Division Manager
(602) 506-6666
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TT (506) 6704

(Permit / File #) _____

Phase II (Notice of Intent to Discharge-NOID) Submittal Checklist

INCORRECT OR INCOMPLETE PHASE II (NOID) PACKETS WILL NOT BE ACCEPTED

_____ **Sewer Availability required for every application**. See attached sewer determination sheet
_____ **Completed NOID** application with **original signature** of **OWNER** or **Letter of Authorization**
_____ **Pages requiring permit number, signature of designer & date must be submitted**
_____ **Recorded** copy of **deed, including legal description and parcel number**
_____ **One (1) Floor Plan** with dimensions and all rooms and plumbing fixtures clearly labeled
_____ **Fixture Unit/Bedroom Equivalent Chart/Calculations Worksheets** used to design the system
_____ **Plan and profile** with pipe elevations of tank and **Cross Sections** of disposal components
_____ **All reports** regarding soil/site evaluations, percolation tests or seepage pit performance test, **if not** performed by MCESD
_____ **Two (2) complete site plans:** use scale of 1"=30', 1"=20' or 1"=10'. **Break lines are prohibited!** For larger parcels, use appropriate scale to fit parcel on one sheet of paper. Onsite system, the structure it serves, and the immediate area shall be on separate sheet to scale. Indicate scale and **north** arrow on site plan. Maximum paper size is 24" x 36".

Site Plans shall include (see example):

_____ Location of septic tank, distribution box, distribution lines, primary and reserve disposal areas (**Drawn to scale and indicating north arrow**)
_____ Location of all structures, driveway(s), washes, and/or drainage easements on site.
_____ Identify all easements (utility, drainage, etc) and setbacks, with distance from property lines
_____ Location of any well and water line from well or meter to building
_____ Any features (well, wash, etc) within 200' of the proposed site which may impact the location of the proposed OSWTF or reserve areas. Indicate if bordering lots are vacant or built on.
_____ Information Block with property owner's name, site address, permit number, subdivision name, lot number or legal description and parcel number
_____ Signature Block**,** signed by designer, on first submission and any revision

_____ **Water company name and identification number**, if serviced by a water company
_____ **Recorded** Shared Well Agreement with survey (otherwise, tank and disposal area must be greater than 50' from the property line), if water is not supplied by a common water system
_____ **Survey map (recent);** If there has been a lot split then, a **recorded** survey with legal description of **ALL** lots involved in the split is required**.**
_____ **Topographic Map** if the slope of the land in the proposed primary and/or reserve areas is greater than five (5%) percent
_____ **Grading and Drainage Plan** submitted to One Stop Shop or other permitting agency, if required
_____ **Vicinity Map**
_____ **Detailed driving directions** to the site, **and** approximate distances from paved cross streets.
_____ If you are submitting a later version of any documentation, in the top right corner clearly write **REVISED** and the date of the revision
_____ **Septic system designer must sign and write the permit number issued by MCESD on all documents** required for submittal to MCESD for proper placement in the file
_____ **Applicable Fees: (see fee schedule),** due at the time of submittal, Cash or Check

Applicants signature_____ **Date**_____

DETERMINATION OF SEWER TAP LOCATION

The owner or person requesting to install an onsite system must determine the location of the sewer tap nearest to the property. Arizona Administrative Code R18-9-A309 sets requirements for hook-up to sanitary sewer.

> "Sewer connection is required if the connection is practical. A connection is practical if the distance to connect to the sewer is 400 feet or less and the total cost of the connection is less than $6000, if capacity is available, and the performance of the sewage collection system and receiving sewage treatment facility are not impaired." The $6000 is for hard construction costs only from the nearest point on the property line to the nearest point of connection. Connection fees are a separate cost.

Maricopa County provides the phone numbers below to begin your search for the nearest sewer tap location. Some municipalities may have more stringent requirements and will require connection to city sewer. A statement indicating the availability of the sewer is needed prior to any submittal to the environmental services department.

AVONDALE	623-932-1909
BUCKEYE	623-386-2487
CAVE CREEK	480-488-1400
CAREFREE	480-488-3638
EL MIRAGE	623-933-8318
GILBERT	480-503-6000
GLENDALE	623-930-2000
GOODYEAR	623-932-1637
MESA	480-644-2231
PARADISE VALLEY	480-348-3528
PEORIA	623-773-7210
PHOENIX	602-262-6551
QUEEN CREEK	480-987-0496
SCOTTSDALE	480-312-2356
SURPRISE	623-583-0947
TEMPE	480-350-8341
TOLLESON	623-936-7141

MARICOPA COUNTY ENVIRONMENTAL SERVICES MAKES EVERY ATTEMPT TO PROVIDE ACCURATE INFORMATION. PHONE NUMBERS MAY CHANGE WITHOUT OUR KNOWLEDGE.

CHAPTER I
MARICOPA COUNTY HEALTH CODE
WATER & WASTE MANAGEMENT DIVISION
ON-SITE WASTEWATER PROGRAM AND WELL PROGRAM
FEE SCHEDULE (excerpt)* - Effective June 18, 2003**

BASE PLAN REVIEW FEE SCHEDULE	
*Septic Tank with Conventional Disposal, Less than 3000 gal./day	$ 300.00
*Septic Tank with Alternative** Disposal, starting at	800.00
Site inspection	125.00
Site Inspection with Domestic Well Approval	150.00
Alteration Permit (replace tank OR disposal field, not both)	75.00
Alteration Permit including one (1) Inspection	140.00
Reconnect / Remodel Review (may lead to new system being required)	35.00
Reconnect / Remodel Review including one (1) Inspection	105.00
Plan Revision (After Authorization to Construct has been issued)	70.00
Request for alternative design, installation or operational features (A312G)	75.00
Design with Interceptor, add for each interceptor in the design	100.00
Domestic Well Approval	65.00
Duplicated Copy	.50/sheet

* Gravity-fed trenches, seepage pits, leach beds, or chambers. Includes up to two (2) plan reviews and three (3) construction inspections.

** These alternative disposal elements are all for systems of less than 3000 gal./day and include the following: Pressure distribution systems; gravelless trenches; natural seal Evapotranspiration beds; lined Evapotranspiration beds; Wisconsin Mounds: Engineered Pad Systems; Intermittent Sand Filters; Peat Filters; Textile Filters; Ruck® Systems; sewage vaults; aerobic systems/subsurface disposal; aerobic systems/surface disposal; cap systems; constructed wetlands; sand lined trenches; disinfection devices; sequencing batch reactors; subsurface drip irrigation systems.

*** To see the fee schedule in its entirety go to:
www.maricopa.gov/envsvc/BUSINESS/hlthcode.asp

The Expedited Plan Review Fee is twice the fee for that category.
Expedited Plan Reviews require prior Management approval.

Any questions regarding these fees, contact MCESD, WWM Division at 602-506-6666.

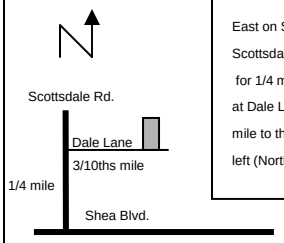
SAMPLE SITE PLAN

PERMIT/FILE # 00-0000

Owner: John Smith
Site Address: 11111 E. Dale Lane
Parcel # 222-22-001B
Subdivision: Lost Acres, Lot 1023
Legal Desc: E1/2, NW1/4, NE1/4, NE1/4, SW1/4 of Sec. 10, T5N, R4E of the Gila and Salt River Base and Meridian, Maricopa County, Arizona

OSWTF Design by: Mary Brown
Hm. Ph. # -602-333-5555
Cell Ph. # - 602-444-9999
Fax # - 623-546-6666
Design/Revision Date: 1/1/10

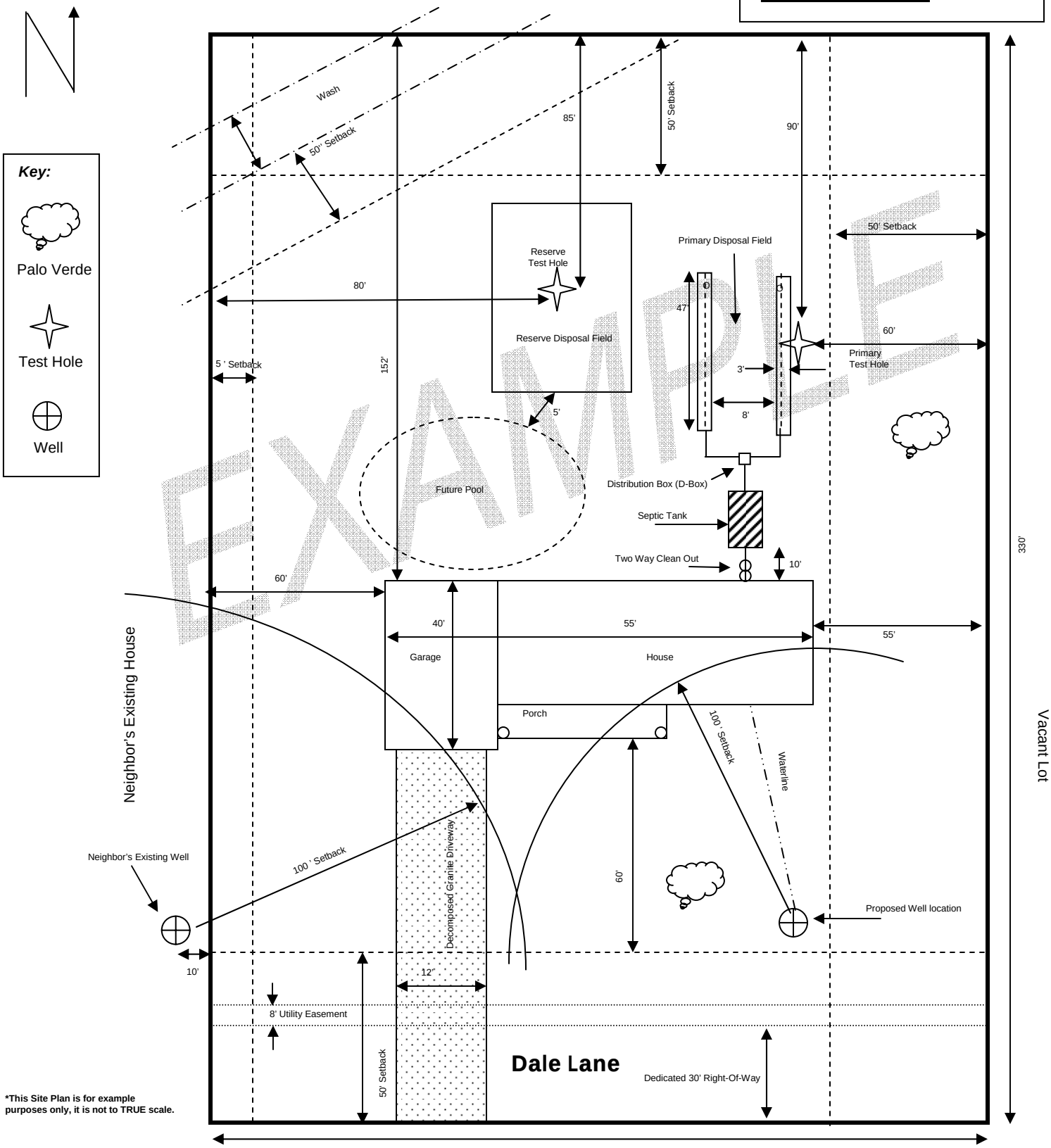
Vicinity Map and Directions, NTS



East on Shea Blvd. to Scottsdale Rd., turn left (North) for 1/4 mile. Turn right (East) at Dale Ln. Go 3/10th's of a mile to the property on the left (North) side of the road.

Note: all setbacks are minimums
*Scale: 1" = 30'

Vacant Lot



Key:

Palo Verde

Test Hole

Well

Designed by: Mary Brown Date: 01/01/2010

***This Site Plan is for example purposes only, it is not to TRUE scale.**

02/15/2005

SETBACK DISTANCE CHART

The design of the On-Site Wastewater Treatment Facility shall comply with the setbacks indicated below.

Feature of Potential Impact	Setback Distance (feet)	
	Septic Tank	Disposal Trench, Bed, or Seepage Pit
Building (1)	10	10
Property line shared with adjoining land **not served** by a common drinking water system or an existing well (2)	50	50
All other property lines.	5	5
Water supply well (public or private)	100	100
Perennial or intermittent stream (3)	100	100
Lake or reservoir (4)	100	100
Drinking water intake from a surface water source (includes an open water body, downgrade spring or a well tapping streamside saturated alluvium).	200	200
Drainage easement or wash with drainage area more than five acres (5)	50	50
Water main or branch water line.	10	10
Domestic service water line (6)	5	5
Downslope cut banks and culvert or roadway ditches (7)	15	15
Driveway (8)	5	5
Swimming pool (9)	5	5
Easement (except drainage easement)	5	5

Notes:

(1) Includes porches, decks, and steps (covered or uncovered), breezeways, roofed patios, carports, covered walks and driveways, and similar structures and appurtenances.

(2) A common drinking water system is a system that currently serves or is under legal obligation to serve the property and may include a drinking water utility, a well sharing agreement, or other viable water supply agreement. A setback may be reduced to a minimum of five feet from the property line if:

a. The owners of any affected undeveloped adjacent properties agree by an appropriate written document to limit the location of any new well on their property to at least 100 feet from the proposed septic tank and primary and reserve disposal field areas; and

b. The arrangements and documentation are approved by the Department.

(3) Measured from the limit of peak streamflow from a 10-year, 24-hour rainfall event.

(4) Measured from the high water line from a 10-year, 24-hour rainfall event at the lake or reservoir.

(5) Measured from the nearest edge of the defined natural channel bank or drainage easement whichever is less. A setback may be reduced to 25 feet if natural or constructed erosion protection is approved by the appropriate flood plain administrator.

(6) The water line separation from sewer lines shall be as follows:

a. A water line crossing a sewer line at an angle of 45 to 90 degrees shall be one foot above the sewer line.

b. A water line crossing a sewer line at an angle of less than 45 degrees is not allowed.

c. A water line that is one to three feet from a sewer line but does not cross the sewer line shall be one foot above the sewer line and may be on a bench in the same trench or in a separate trench.

d. A water line that is less than one foot from a sewer line but does not cross the sewer line is not allowed.

(7) Measured to the top of the cut bank or ditch or to the nearest sidewall of the culvert. The setback to a disposal trench, bed, or seepage pit is 15 feet or four times the elevation difference between the finished grade of the disposal trench, bed, or seepage pit and the elevation at the cut bank bottom, ditch bottom, or culvert invert, whichever is greater, up to 50 feet.

(8) Measured to the nearest edge of septic tank excavation. A properly reinforced septic tank and cover may be placed at any location relative to a driveway if access openings, risers, and covers carry the design load and are protected from inflow.

(9) A setback may be increased due to soil loading and stability concerns.

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SHARED WELL EASEMENTS/AGREEMENTS

Shared well agreements may provide an adjustment to property line setback requirements as stated in the Arizona Aquifer Permit Rule, R-18-9-A312 C.

All shared well agreements MUST contain the following information:

- Effective date
- Parties involved (Grantor and Grantees; Parties to the Agreement)
- Recorded document number
- Full legal description of all the Dominant and Servient parcels sharing the well with instrument number (all the parcels benefiting from sharing the well and easements)
- Full legal description of the well site
- Full legal description of easements and rights of way for well access and utilities with instrument number
- How the agreement will run with the land/deed for the parcels
- The relationship of each parcel to: (construction, operation and expenses)
  - General provisions
  - Management of the provisions of the agreement
  - Percentage ownership
  - Percentage share of cost for operation and maintenance of the well and easements
  - Resolution of conflicts
  - Conditions and Limitations
- Survey or Results of survey
- Title and Signature with date, of Grantor/Grantee (Parties to the Agreement) of all parcels
- Notary stamp, signature and date.

If you have questions or need additional information please contact us at the numbers listed above.

SEPTIC SYSTEM SIZING CHARTS

Use the charts below to complete the Design Worksheet on the following page.

SELECTING THE PROPER SIZE SYSTEM			
*No. of Bedrooms**	*Fixture Count*	*Minimum Septic Tank Size (gallons)*	*System Daily Design Flow (gallons per day)*
1-2	14 or less	1000	300
	more than 14	1000	450
3	21 or less	1000	450
	more than 21	1250	600
4	28 or less	1250	600
	more than 28	1500	750
5	35 or less	1500	750
	more than 35	2000	900
6	42 or less	2000	900
	more than 42	2500	1050
7	49 or less	2500	1050
	more than 49	3000	1200
8	56 or less	3000	1200
	more than 56	3000	1350

For a single residence with more than 8 bedrooms, use either the bedroom count or the fixture count, whichever is greater, and the following formulas:* **For Septic Tank Size: multiply the number of bedrooms by 150, then multiply that total by 2.1. This will equal the minimum septic tank size in gallons. OR multiply the total fixture units by 25, then multiply that total by 2.1. **For System Daily Design Flow**: multiply the number of bedrooms by 150, this will equal the minimum Design Flow in gallons per day. OR multiply the total fixture units by 25.

Obtain percolation rate from soil report. Use the chart below to determine Soil Absorption Rate (SAR). Then, use the Design Flow determined from the above chart. The formula used to determine the required square footage of disposal area is: DESIGN FLOW ÷ SAR. (Example: 600 ÷ 0.63 = 952 sqft)

DESIGN FLOW CALCULATION TABLE-CHAMBER TECHNOLOGY								
		Design Flow--Gallons per Day						
		450	600	750	900	1050	1200	1350
PERC RATE (min/inch)	**SAR (gpd/sqft)**	**Required Square Footage of Disposal Area**						
<1	NOT ALLOWED FOR CONVENTIONAL DISPOSAL							
1 to <3	1.2	375	500	625	750	875	1000	1125
3	1.1	409	545	682	818	955	1091	1227
4	1	450	600	750	900	1050	1200	1350
5	0.90	500	667	833	1000	1167	1333	1500
7	0.75	600	800	1000	1200	1400	1600	1800
10	0.63	714	952	1190	1429	1667	1905	2143
15	0.50	900	1200	1500	1800	2100	2400	2700
20	0.44	1023	1364	1705	2045	2386	2727	3068
25	0.40	1125	1500	1875	2250	2625	3000	3375
30	0.36	1250	1667	2083	2500	2917	3333	3750
35	0.33	1364	1818	2273	2727	3182	3636	4091
40	0.31	1452	1935	2419	2903	3387	3871	4355
45	0.29	1552	2069	2586	3103	3621	4138	4655
50	0.28	1607	2143	2679	3214	3750	4286	4821
55	0.27	1667	2222	2778	3333	3889	4444	5000
55 to<60	0.25	1800	2400	3000	3600	4200	4800	5400
60 to<120	0.20	2250	3000	3750	4500	5200	6000	6750
>120	NOT ALLOWED FOR CONVENTIONAL DISPOSAL							

CHAMBER WORKSHEET

(to be submitted with NOID Application Packet)

FIXTURE COUNT CALCULATION CHART					
FIXTURE TYPE	FIXTURE UNIT		# OF FIXTURES		TOTAL UNITS
Bath Tub (w or w/o shower)	**2**	X		=	
Bidet	2	X		=	
Clothes Washer (w or w/o laundry tub)	**2**	X		=	
Dishwasher (separate from kitchen sink)	2	X		=	
Lavatory (bathroom sink), single	**1**	X		=	
Lavatory, double on same plumbing wall	**1**	X		=	
Lavatory, double on separate plumbing wall	**2**	X		=	
Shower, single stall	**2**	X		=	
Sink, bar (no disposal or dishwasher)	**1**	X		=	
Sink, bar (full size, 2 compartment w or w/o disposal)	2	X		=	
Sink, kitchen (w or w/o dishwasher or disposal)	**2**	X		=	
Sink, service	3	X		=	
Utility tub or Sink, separate from clothes washer	**2**	X		=	
Water Closet (toilet), low flow	**3**	X		=	
Water Closet, old style, not low flow	6	X		=	
				TOTAL FIXTURE UNITS	

Items in BOLD are the most commonly used fixtures.

"Bedroom" means, for the purposes of determining design flow for an on-site wastewater treatment facility for a dwelling, any room has:

a). A floor space of at least 70 square feet in area, excluding closets;
b). A ceiling height of at least 7 feet;
c). Electrical service and ventilation;
d). A closet or area where a closet could be constructed;
e). At least one window capable of being opened and used for emergency egress; and
f). A method of entry and exit into the room which allows it to be considered distinct from other rooms in the dwelling to afford a level of privacy customarily expected for such a room.

Bedroom / Equivalent Worksheet	
Room Type	**Number of Rooms**
Bedroom	
Den	
Office	
Other:	
Other:	
Other:	
Total:	

Type of Chamber (circle one): ***STANDARD (QUICK 4)*** ***HIGH CAPACITY***

Fill in the TANK SIZE from the OSWTF Sizing Chart Worksheet. **TANK SIZE =** _____

Fill in the DESIGN FLOW from the OSWTF Sizing Chart Worksheet. **DESIGN FLOW** = _____

Fill in the PERCOLATION RATE from the Soils Report **PERC. RATE** = _____

Divide DESIGN FLOW by the shallow SAR from the Conversion Chart. **SHALLOW SAR** = _____

This equals the total square footage of disposal area required.

TOTAL SQUARE FOOTAGE OF DISPOSAL AREA REQUIRED = _____

For ***STANDARD (QUICK 4)*** chambers, divisor is **5.61**. For ***HIGH CAPACITY*** Chambers, divisor is **5.95.** **DIVISOR USED** = _____

Divide the total square footage by the divisor, this will equal the total linear length of trench required.

TOTAL LINEAR LENGTH OF TRENCH = _____

The length of the Quick 4 chamber is **4 feet**. The length of the High Capacity chamber is **6.25 feet**. Divide the total length of trench by the applicable chamber length.

TOTAL NUMBER OF CHAMBERS = _____

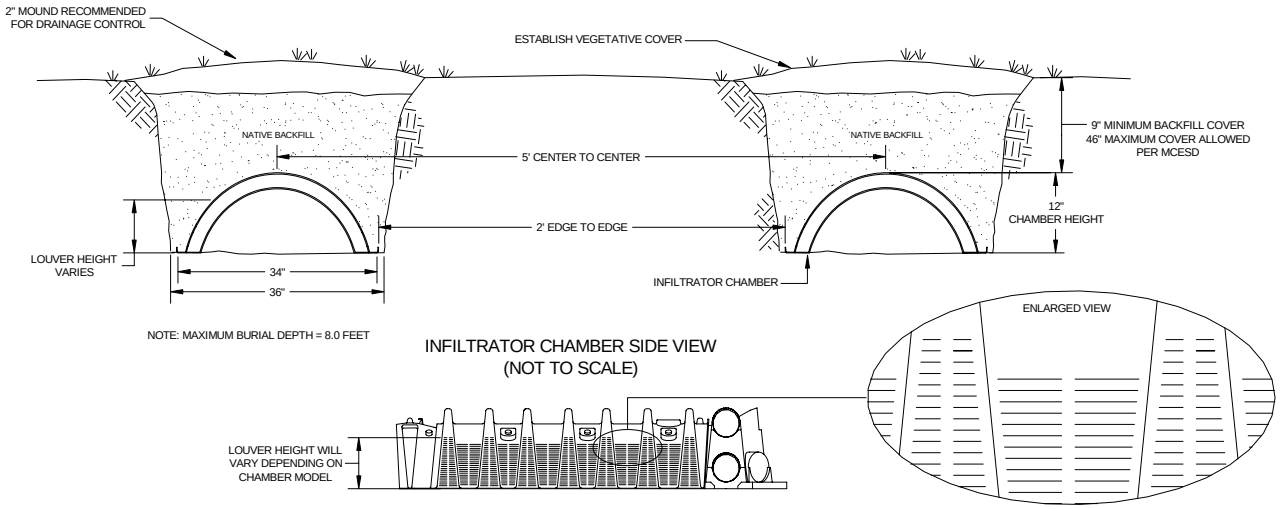
Proposed Number of Trenches	
Proposed Length of each Trench	
Proposed Width of each Trench	
Proposed Number of Chambers per Trench	
Proposed Overall Depth of Trench (es)	
Separation Between Trench Edge	

(Permit / File #) _____ **Designed by:** _____ **Date:** _____

Cross Section for Chambers

(to be submitted with NOID Application Packet)

INFILTRATOR CHAMBER TRENCH DESIGN
DETAIL
(NOT TO SCALE)



1. If the total linear length of trench is greater than 50’ it is recommended that the total is divided into more than one trench of equal size to distribute the effluent throughout the disposal field more effectively separated by a distribution box.

2. If the total number of High Capacity chambers exceeds 16 or the total number of Standard Quick4 chambers exceeds 25, it is recommended to divide this number into more than one trench of equal lengths.

3. The separation between piping in the trenches is 5’ on center or twice the effective depth whichever is greater.

4. The maximum burial depth per chamber is 8’ from trench bottom to ground surface.

5. Each Standard Quick4 chamber can be rotated 10 degrees at each connection to contour or avoid large obstructions.

6. The maximum length for any disposal field is 100’. Additional inspection risers are required for any trench greater than 50’ in length placed in the center of the trench.

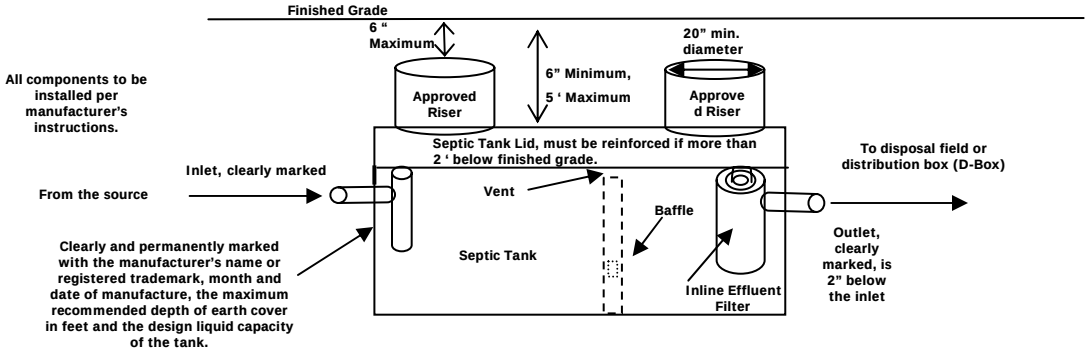
**This diagram is for example purposes only; it is not to TRUE scale.

(Permit / File #)_____ Designed by:_____ Date:_____

SEPTIC TANK AND DISTRIBUTION BOX (D-BOX) TIPS

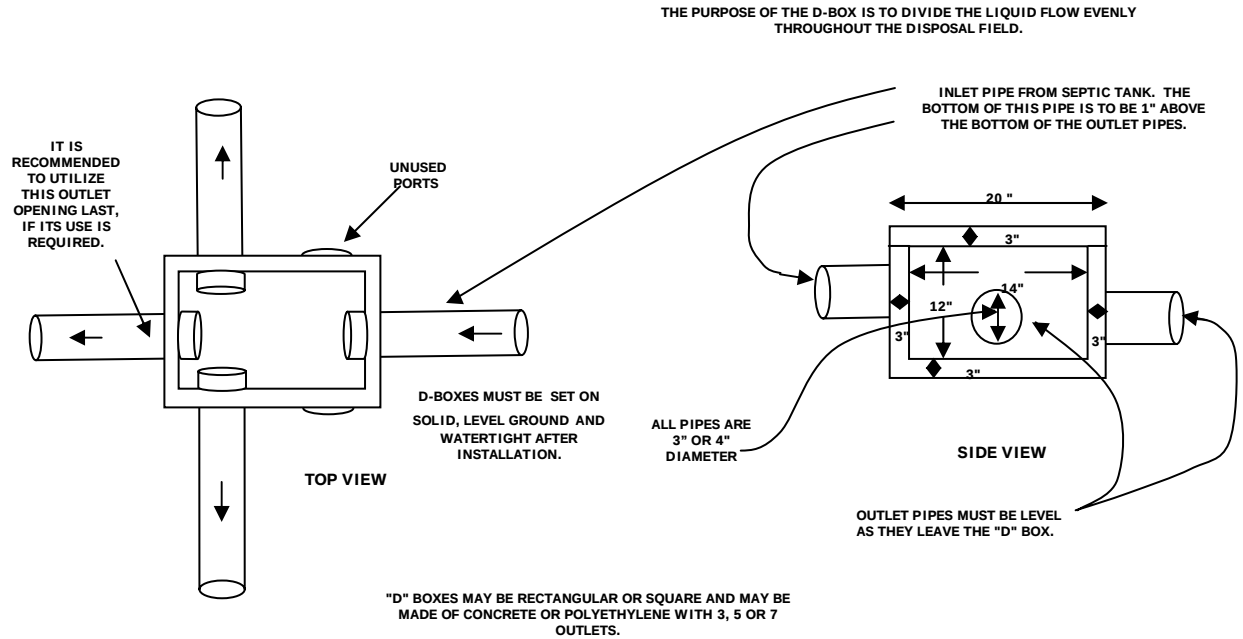
(to be submitted with NOID Application Packet)

Consideration of how deep the plumbing stub-out is at the proposed septic tank location will determine how deep the tank and disposal field must be. Septic tanks that are installed so the top of the tank is two feet (2') to five feet (5') below finished grade will require additional reinforcement in the lid and risers. Tank lids that are greater than six inches (6") below finished grade are required to have risers installed so access openings on the top of the tank are within six inches (6") of finished grade. **Tanks that are installed so the top of the tank is greater than five feet (5') deep are not allowed**. In cases where the plumbing stub out is too deep to install the tank as described above the sewage may have to be pumped up to the tank from the source. If the designated reserve disposal field is at a higher elevation than the septic tank, across a wash or too far away (100' is the maximum separation between septic tank and disposal field), it may be required to have a lift station engineered and approved prior to utilizing the primary or reserve disposal fields.



It is recommended that the OSWTF be installed as shallow as possible to utilize the benefit of evaporation through the top soils.

TYPICAL DISTRIBUTION, "D", BOX



These diagrams are for example purposes only; they are not to TRUE scale.

02/15/2005

(Permit / File #) _____ Designed by: _____ Date: _____

Maricopa County Environmental Services Department
Water & Waste Management Division
(Delegated Authority for ADEQ)
1001 N Central Ave, Suite 150
Phoenix, AZ 85004
Phone: (602) 506-6666
Fax: (602) 506 6925

NOTICE OF INTENT TO DISCHARGE (NOID) APPLICATION

Under a General Aquifer Protection Permit for an On-Site Wastewater Treatment Facility (OSWTF)

OSWTF Permit # __-__-____

Instructions: Fill out completely (**failure to do so will result in a delay of the permitting process**) and submit this NOID to obtain authorization to construct and approval to discharge from a new or altered OSWTF, including a **conventional septic tank and / or disposal field system or alternative on-site treatment and disposal technologies** covered by Aquifer Protection Permits. All required information must be submitted along with this application and applicable fees, cash or check only. **Print or type in black or blue INK** (pencil is not acceptable) all information except the signature block on page two. This application will expire one year from the date of submittal if Authorization to Construct has **not** been issued.

1. Site Location:

Subject Property Address**:** _____ Maricopa County, AZ _____
(Required at time of PVGPC issuance; Street Name and Number; City (if applicable); Zip Code)

Cross Streets _____ Parcel Number __ __ __ - __ __ - __ __ __ __

Subdivision Name (if applicable): _____ Lot #(s) _____

Legal Description**:** Section _____ Township _____ Range _____ Acreage _____

2. Property Owner

Name: _____ Phone # _____

Current Mailing Address*: _____ Fax # _____
(Street Name and Number)

_____ Mobile # _____
(City; State; Zip Code)

*Any changes to this address shall be submitted in writing to MCESD within 15 days of the change. All documents from MCESD will be mailed to this address unless otherwise noted below. Returned mail will not be forwarded.

3. Authorized Agent *for Property Owner, (if none, then leave blank)**:***

Business Name: _____

Agent's Name _____ Contractor License #: _____

Business Mailing Address: _____ Phone # _____
(Street Name and Number)

_____ Fax # _____
(City; State; Zip Code)

Are you authorized to install the OSWTF? **(circle one)** YES NO Mobile # _____

If **NO,** fill out the Septic Installer information below:
After 30 Days, unclaimed Authorizations to Construct will be mailed to: **(circle one)** Property Owner Authorized Agent

4. On-Site Installer - *Person authorized to install the OSWT, (if same as the Property Owner or Authorized Agent, leave blank):*

Business Name: _____ Contact Person Name: _____ Contractor's License # _____

Business Mailing Address: _____ Phone # _____
(Street Name and Number)

_____ Fax # _____
(City; State; Zip Code)

Mobile # _____

THIS IS A TWO (2) PAGE DOCUMENT; BOTH PAGES MUST BE COMPLETED BEFORE SUBMITTING TO MCESD.

THIS SPACE FOR OFFICE USE ONLY

LICENSING TIME FRAMES

NOID Log in Date _____ By _____

ACR Completed _____ By _____
(Paperwork Review)

ACR Incomplete/HOLD _____ By _____

SR Pre Const Completed _____ By _____
(Plan Review)

SR Pre Const -Incomplete/HOLD _____ By _____

SR Post Const Completed _____ By _____
(Inspection)

Site Code: _____

MC P/D Tracking # B _____

APPROVALS: General Permit (circle one): 4.02 Other _____

Design Flow: _____gpd System Type**:** _____

BILLING PURPOSE	AMT PD	RECEIPT #	DATE PD
PLAN REVIEW / SITE			
PLAN REVIEW / SITE			
OTHER			

OSWTF Permit # ___-___-____

5. Site Details:

SEWER **(circle one) IS / IS NOT** AVAILABLE WITHIN 400' OF THE PROPERTY.

WATER SOURCE: **(check one)** _____Water Company: Water Company Name _____

Provide Will Serve Letter with Water Company ID # _____

(All information must be clearly shown on the site plan)

_____Private Well - current/proposed date of installation _____

IS installed on site_____ **IS NOT** installed on site_____

_____Shared Well*- current/proposed date of installation _____

SWA Recording #_____ **IS** installed on site_____ **IS NOT** installed on site_____

IS shared with properties to the **(circle all that apply)**: N S E W Other_____

* A copy of all shared well agreements, recorded as an attachment to the deed of the subject properties, may be required as supplemental information **IF** the fifty foot (50') setback to the common property line between the OSWTF and adjacent property can not be met **AND** there is not a well already installed on the adjacent property to the side that can not meet the required setback.

_____Holding Tank (hauling water) - Fifty foot (50') setback is required.

ALL EXISTING WELLS ON AND WITHIN 200' OF THE SUBJECT PROPERTY ARE SHOWN ON THE SITE PLANS, **(circle one). YES NO**

Check One: ____Prior site work has been initiated and is on file with MCESD, W/WM. Existing file number(s) _____

____No prior site work has been filed for this site with MCESD, W/WM. The NOID Packet includes all site/soils reports.

6. Narrative Description of Project:

☐ **NEW - General Permit 4.02** (OSWTF which consists solely of a septic tank **AND** conventional disposal field circled below)**:**

(circle one) Shallow Trench Deep Trench Seepage Pit Leach Bed Chamber Technology

☐ **ALTERATION - General Permit 4.02** (OSWTF which consists solely of a septic tank **OR** conventional disposal field circled below)**:**

(circle one) Tank Shallow Trench Deep Trench Seepage Pit Leach Bed Chamber Technology

☐ **Any Other OSWTF.** Describe proposed treatment and disposal train and indicate all applicable general permit numbers; indicate design flow and expected date of operation; describe sewage source and characteristics: _____

_____.

THE OSWTF WAS DESIGNED USING A SEPTIC TANK SIZE AND A DESIGN FLOW TO:

☐ **Serve a Single-Family Residence** with typical household sewage.

☐ **Serve a Single-Family Residence** with typical household sewage and _____
List all other sources and characteristics of the wastewater

☐ **Serve Other Than a Single-Family Residence** with typical household sewage.

☐ **Serve Other Than a Single-Family Residence** with other than typical household sewage.
If other than a Single-Family Residence, **then** fill out the following information:

Type of Facility_____ **Number of Employees/Users**_____

☐ Other sources and characteristics of the wastewater_____

7. Existing Environmental Permits:

List any state or federal environmental permits already associated with this site or that are needed (**check all that apply**) :

___ New installation of an on-site wastewater treatment facility. ___No other environmental permits exist. ____Other environmental permits required (list all): _____

8. Certfication: (READ CAREFULLY AND SIGN BELOW, to be completed by the property owner identified in Item Two (2) on the front of this application:

I _____, certify that this Notice of Intent to Discharge and all attachments were prepared
Print Name

under my direction or authorization and all information is, to the best of my knowledge, true, accurate and complete. I also certify that the on-site wastewater treatment facility described in this form is or will be designed, constructed, and operated in accordance with terms and conditions of the authorized general aquifer protection permit(s) and applicable requirements of Arizona Revised Statues Title 49, Chapter 2, and Arizona Administrative Code Title 18, Chapter 9 regarding aquifer protection permits and the Maricopa County Health Code. **I am aware that there are significant penalties for submitting false information including permit revocation as well as the possibility of fine and imprisonment for known violations.**

_____ _____
Signature Date